



# If You Get Extra Help, Make Sure You're Paying the Right Amount

Getting “Extra Help” means Medicare helps pay your Medicare Prescription Drug Plan’s (Part D) monthly premium, any yearly deductible, coinsurance, and copayments.

## What should my costs be?

If you qualify for Extra Help, you should pay no more than \$2.50 for a generic drug (or brand-name drug treated as a generic) and \$6.30 (in 2011) for any other brand-name drug. Some people will pay 15% of the costs of drugs on their plan’s formulary (drug list). If you have Medicaid and live in an institution (such as a nursing home), you should pay nothing for your covered drugs.

Most people who qualify for Extra Help also pay nothing for their monthly premium or yearly deductible. If you qualify for Extra Help and are paying a premium for your Medicare drug plan, you can join another plan and pay no premium in 2011.

You may want to compare the costs, coverage, and customer service ratings of other Medicare drug plans in your area before you switch plans. If you want to join a different plan, you can do so by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can also call that plan directly.

Some people with higher incomes receive partial Extra Help. They pay reduced monthly premiums, deductibles, and copays.



## What if I think I'm paying the wrong amount?

Call your drug plan. Your plan may ask you to provide information to help them check the level of Extra Help you should get. Here are some examples of documents you can send your plan to help prove you qualify for Extra Help:

- A purple notice from Medicare that says you automatically qualify for Extra Help.
- A yellow or green automatic enrollment notice from Medicare.
- An Extra Help "Notice of Award" from Social Security.
- An orange notice from Medicare that says your copayment amount will change next year.
- If you have Supplemental Security Income (SSI), you can use your award letter from Social Security as proof that you have SSI.

You can also give your plan any of the following documents (also called "Best Available Evidence") as proof that you qualify for Extra Help in 2011. Each item listed below must show that you were eligible for Medicaid during a month **after June 2010**.

<b>Proof you have Medicaid and live in an institution</b>	<b>Other proof you have Medicaid</b>
<ul style="list-style-type: none"><li>▪ An invoice from the institution (like a nursing home) showing Medicaid paid for your stay for at least a month</li><li>▪ A copy of a state document showing Medicaid payment to the institution for at least a month</li><li>▪ A print-out from your state's Medicaid system showing that you lived in the institution for at least a month</li></ul>	<ul style="list-style-type: none"><li>▪ A copy of your Medicaid card (if you have one)</li><li>▪ A copy of a state document that shows you have Medicaid</li><li>▪ A print-out from a state electronic enrollment file or from your state's Medicaid systems that shows you have Medicaid</li><li>▪ Any other document from your state that shows you have Medicaid</li></ul>



Your plan must accept any of these documents as proof that you qualify for Extra Help. As soon as you have provided any one of these documents, your plan must make sure that you pay no more to fill your prescriptions than the amounts listed on the front of this sheet.

If you qualify for Extra Help because you have Medicaid, but you don't have or can't find any of these documents, ask your plan for help. Your plan must also contact Medicare so Medicare can get proof that you qualify, if it's available. You can expect your request to take anywhere from several days to up to 2 weeks to process, depending on the circumstances. Be sure to tell your plan how many days of medication you have left. Your plan and Medicare will work to process your request before you run out of medication, if possible.

### **Can I get money back if I've been paying too much?**

If you aren't already enrolled in a Medicare drug plan and paid for prescriptions since you qualified for Extra Help, you may be able to get back part of what you paid. Keep your receipts and call your plan or Medicare's Limited Income Newly Eligible Transition (NET) Program at 1-800-783-1307 for more information. TTY users should call 1-877-801-0369.



## **Who should I call for help?**

If your plan doesn't correct a problem to help you pay the right amount, doesn't respond to your request for help, or takes longer than expected to get back to you, call 1-800-MEDICARE (1-800-633-4227) to file a complaint. TTY users should call 1-877-486-2048. For free help in another language, say "Agent" at any time to talk to a customer service representative.